This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION 1	NUMBER:							
	BEST AVAILAE						CO	PΥ
•		Total Fe	e Calcula	ation	ı			
	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
•	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101		•		 .		=	
Total Claims >20	203/103	20	=	x			=	-
Independent Claims >3	202/102	-3	<u> </u>	x			=	-
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105						=	
English Translation	139							
TOTAL FEE CALCUL	<u>ATION</u>							
Fees due upon filing	the application	; T	Ma ak	λ. α	ALINE	\$ 110		
Total Filing Fees Due	e = \$ _	and im	JUNIO OS	71,	7			٠
Less Filing Fees Sub	mitted -\$_				·			
BALANCE DUE	= \$ _							
Office of Initial Pate	nt Examination	1 .						

FORM OIPE-RAM-01 (Rev. 12/97)